(361) 992-7531

RE: Eric Gonzales v. City of Corpus Christi, et al., Cause No. C-05-280, Our File No. 15.170

Dear Dr. Carey:

Please be advised that this office represents Eric Gonzales in a claim for damages he has alleged against the Corpus Christi Police Department and police officer Morrow, and against Nueces County and Nueces County jail personnel for injuries he sustained on June 3, 2004, when he was initially hit in the head with a baton by CCPD officer Morrow and then beaten again at the Nueces County jail, where Mr. Gonzales teeth were knocked out from the blows he received when the Nueces County deputies beat his face into a concrete bench or floor in the jail.

On or about, August 29, 2005, you examined Mr. Gonzales regarding his dental condition. I am writing to request that you provide me with a written report responding to the following matters:

- 1. Please provide me with a copy of your resume or Curriculum Vitae, or state in your report your educational background, degrees and continuing education, and work experience in your profession.
- 2. Please state the examination performed on Mr. Gonzales, the results or findings and opinions you have formed as a result of examining Mr. Gonzales.
- 3. Please state your opinion describing Mr. Gonzales condition, and whether the condition of his teeth and gums or other health condition that you observed or diagnosed likely resulted from the incident on June 3, 2004. Please include in your report a medical description and explanation of what injuries Mr. Gonzales suffered, the result of those injuries, and in your opinion, if the condition can be treated; and if so, what treatment you recommend.
- 4. Please state the medical or dental treatment, in your opinion, Mr. Gonzales requires to treat his condition.
- 5. Please state the cost for any treatment that you have provided to Mr. Gonzales to date, and this should include the office visit for the initial examination, and the amount that you estimate is necessary for treating Mr. Gonzales condition that you recommend, and in your opinion, the treatment Mr. Gonzales requires for his condition. Please include an convalescent time, prescription and/or non-prescription medications, follow up visits, and special treatment.
- 6. Please state in your report if the treatment you identify is based on reasonable medical probability and if the costs that you estimate are for medical treatment that is reasonable and necessary.

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7. Please state any long term or permanent damage, scarring, disfigurement, or other adverse effect Mr. Gonzales may have as a result of the injury he sustained to his teeth, gums and mouth, and any future care or treatment you recommend.

Because this case is pending in Federal Court, I also need to have you provide me with the following information:

- 8. Your report must include all of your opinions including the basis and reasons for your opinion, the data or information you considered in forming your opinion. This can include the examination, your education and knowledge and experience in these matters, and the information provided to you by the patient of how he sustained the injury.
- 9. Please advise if you took x-rays or have other diagrams or tangible items showing, indicating or exhibiting Mr. Gonzales condition. If so, please identify those items.
- 10. Please state your qualifications (or provide a Curriculum Vitae) including all publications you have authored within the preceding ten years.
- 11. The compensation to be paid for the report and testimony if you are called to testify by deposition or live at trial.
- 12. Listing of cases in which you have testified as an expert at trial or by deposition within the preceding four years.

I am enclosing a medical release authorizing you to provide me with this information. I am also enclosing a business records affidavit for you to provide me with a complete copy of Mr. Gonzales medical records.

I need to receive your report no later than January 10, 2006. Thank you for your consideration and attention to this matter. If you have any questions or need to speak with me, you can best reach me on my cellular telephone (361) 815-5569.

Yours truly,

/s/ Gail Dorn

Gail Dorn

Enclosure